

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000017018

FILED
Jun 04, 2009
Secretary of State

Entity Name: MARIOLKA'S CUSTOM BRIDAL BOUTIQUE AND DRAPERIES, INC.

Current Principal Place of Business:

4709 NORTH CONGRESS
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

4709 NORTH CONGRESS
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 36-4433532

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OLEJNICZAK, MIREK
4709 NORTH CONGRESS
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OLEJNICZAK, MARIE J
Address: 4709 NORTH CONGRESS
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Delete
Name: OLEJNICZAK, MIREK
Address: 4709 NORTH CONGRESS
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: OLEJNICZAK, MARIA J
Address: 4709 NORTH CONGRESS
City-St-Zip: BOYNTON BEACH, FL 33426

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIREK OLEJNICZAK

MR.

06/04/2009

Electronic Signature of Signing Officer or Director

_____ Date